



DIVISION OF DRIVER LICENSING

**APPLICATION FOR RENEWAL OR DUPLICATE LICENSE BY MAIL
(MILITARY PERSONNEL AND MILITARY DEPENDENTS ONLY)**

KRS 186.412 (10) STATES IN PART: IF A CITIZEN OF THE COMMONWEALTH CURRENTLY SERVING IN THE UNITED STATES MILITARY IS STATIONED OR ASSIGNED TO A BASE OR OTHER LOCATION OUTSIDE THE BOUNDARIES OF THE COMMONWEALTH, THE CITIZEN MAY RENEW A CLASS (D) OPERATOR'S LICENSE ISSUED UNDER THIS SECTION BY MAIL.

CLASS A, B, OR C LICENSES (CDL) CANNOT BE RENEWED BY MAIL.

THIS APPLICATION IS FOR () DUPLICATE LICENSE () RENEWAL LICENSE

IF THIS APPLICATION IS A DUPLICATE, I CERTIFY THAT MY LICENSE WAS LOST, TAKEN OR DESTROYED THROUGH NO EFFORT ON MY PART.

LAST NAME	FIRST	MIDDLE	MAIDEN	DATE OF BIRTH (MM/DD/YYYY)
KENTUCKY ADDRESS (REQUIRED)				LICENSE NUMBER
CITY	STATE	ZIP CODE	COUNTY	EMAIL ADDRESS
WEIGHT (LBS)	HEIGHT (FEET/INCHES)	EYE COLOR	CELL PHONE #	

FEE SCHEDULE

CLASS D (OPERATOR) \$20.00	CLASS E LICENSE (MOPED) \$20.00	CLASS M (MOTORCYCLE) \$24.00
DUPLICATE LICENSE (OPERATOR) \$12.00	CLASS D & M (OPERATOR/MOTORCYCLE) \$30.00	

REQUIREMENTS FOR MILITARY PERSONNEL AND MILITARY DEPENDENTS TO RENEW BY MAIL:

1. MUST BE STATIONED OUTSIDE THE STATE OF KENTUCKY. WHERE STATIONED? _____
2. A CERTIFIED OR NOTARIZED COPY OF EXPIRED, OR SOON TO BE EXPIRED KENTUCKY DRIVER'S LICENSE IF APPLYING FOR A RENEWAL.
3. A CERTIFIED OR NOTARIZED COPY OF THE MILITARY ID CARD, OR MILITARY DEPENDENT CARD, OR A WRITTEN STATEMENT FROM THE COMMANDING OFFICER CERTIFYING THE STATUS OF THE SOLDIER OR DEPENDENT.
4. A CERTIFIED OR NOTARIZED COPY OF THIS COMPLETED FORM.
5. ANSWER THE QUESTIONS AND SIGN YOUR NAME ON THE ATTACHED SIGNATURE CARD.

THIS NOTICE, THE ABOVE REQUIREMENTS, THE APPROPRIATE FEE (FEE SCHEDULE ABOVE) AND A SELF-ADDRESSED, STAMPED ENVELOPE MUST BE RETURNED TO THE CIRCUIT COURT CLERKS OFFICE IN YOUR COUNTY OF RESIDENCE. FOR EMAIL USERS, PLEASE VISIT <https://drive.ky.gov> AND CLICK ON: DRIVER SERVICES - FIND AN OFFICE - CIRCUIT CLERK OFFICES, TO FIND THE CIRCUIT CLERK OFFICE IN YOUR COUNTY OF RESIDENCE.

Kentucky Driver License Application

Please Circle **Yes** or **No**

1. Are you a U.S. Citizen? **Yes** **No**
- 1a. If you are not a U.S. Citizen, are you a Permanent Resident? **Yes** **No**
2. Have you suffered a seizure or blackout within the past 90 days?
Yes **No**
- If **yes**, please fill in date of last seizure.

M	M	Day	Day	Yr	Yr

Date of Last Seizure

3. Is your driving privilege suspended or revoked in any state or jurisdiction? **Yes** **No**
4. Do you have any physical/mental impairments that affect your driving abilities or have you had a blackout within the past 3 years? **Yes** **No**
5. If applying for a duplicate KY license or KY ID card, was said license or ID card lost or stolen? **Yes** **No**
6. Do you currently have a license or identification card from another state or jurisdiction? **Yes** **No**

I affirm that I am the person named and described in the KY Drivers Licensing Information System and the statements provided in this application and to the licensing officials are true and correct. I understand that misrepresentation in the licensing process can result in criminal and civil penalties under state and federal law.

Please sign in box with black ink